

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	LM	32	1/31
FORMALITY REVIEW	18	2906	620701
RESPONSE FORMALITY REVIEW	MM	825	61801

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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